FORM C/OH **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. 30 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY** OFFICEHOLDER Mr. Raynaldo T. NAME Date Received LAST **SUFFIX NICKNAME** Ray Lopez O Date Hand-delivered or Date Postmarked CANDIDATE / ZIP CODE ADDRESS / PO BOX; APT / SUITE #; CITY; OFFICEHOLDER 7015 Quiet Ridge Walk MAILING Receipt # **ADDRESS** CI Change of Address San Antonio, TX 78250-3544 Date Processed 2 Date Imaged \Box CAMPAIGN MS / MRS / MR **FIRST** ΜI Andrew J. **TREASURER** Mr. NAME **NICKNAME** LAST **SUFFIX** Andy Greene CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; STATE; ZIP CODE CITY; **TREASURER ADDRESS** 5642 Timber Steep (Residence or Business) San Antonio, TX 78250-5903 CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION** TREASURER **PHONE** 210 520-9412 REPORT **TYPE** 15th day after campaign treasurer $|\mathsf{x}|$ January 15 30th day before election Runoff appointment (officeholder only) Exceeded \$500 limit Final Report (Attach C/OH-FR) July 15 8th day before election PERIOD Month Year Day Year Month Day COVERED THROUGH 12/31/2015 07/01/2015 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special 12 OFFICE SOUGHT (if known) 11 OFFICE OFFICE HELD (if any) Place District 6 District San Antonio **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH **COVER SHEET PG 2**

				2 of 31
3 C / OH NAME	Lopez, Raynaldo	1	4 Filer ID	
.5 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditure These expenditures may have been made without the d officeholders are required to report this information of	e candidate's or officehold	ler's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	The state of the s	
	GENERAL			돌 일후관
		COMMITTEE ADDRESS		5 3 3 6 6 7
	SPECIFIC			OLERK OLERK
		COMMITTEE CAMPAIGN TREASURER NAME		City
		COMMITTEE CAMPAIGN TREASURER ADDRESS	5	
6 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (OTHER TH ARANTEES OF LOANS), UNLESS ITEMIZED	IAN PLEDGES,	0.00
TOTALS		CAL CONTRIBUTIONS		
		PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	11,175.00
EXPENDITURE TOTALS		AL EXPENDITURES OF \$100 OR LESS, UNLESS IT	FEMIZED \$	742.22
		CAL EXPENDITURES	\$	8,695.99
CONTRIBUTION BALANCE	REPORTING PE		***************************************	37,114.56
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF	PAL AMOUNT OF ALL OUTSTANDING LOANS AS O	F THE LAST DAY	25,000.00
7 AFFADAVIT	LIANE DAVIS My Commission Expir February 26, 2018		of perjury, that the accomp nformation required to be candidate or Officeholder	panying report is reported by me
	cribed before me, by the s		_, this the15 ^{±±}	<u></u> day
Signature of office	cer administering	Printed name of officer administering	Executive A	dministrator/N

SUBTOTALS - C/OH

FORM C/OH **COVER SHEET PG 3**

					3 01 31
	ER NAN Dez, Ra				
	HEDULI ME OF :	S	SUBTOTAL AMOUNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	10,675.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	500.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	8,695.99
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD				
9.	9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS				
10.	10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH				
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/6 Rpt: 4/31 2 FILER NAME 3 Filer ID Lopez, Raynaldo 4 Date 5 Full name of contributor out-of-state PAC (ID#:_ 7 Amount of Contribution (\$) 10/30/2015 Ceballos, Lizardo \$500.00 6 Contributor address; City; State; Zip Code 1210 Whitby Tower San Antonio, TX 78258-7484 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$)) 10/30/2015 Comparini, Charles \$500.00 Contributor address; City; State; Zip Code 827 Gillespie St San Antonio, TX 78212-3705 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 10/30/2015 Cude, Joshua \$500.00 Contributor address; City; State; Zip Code 1160 Rodalyn Drive Boerne, TX 78006 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 10/30/2015 Davila, Tony \$500.00 Contributor address; City; State; Zip Code 6727 Lazyridge Dr. San Antonio, TX 78229 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 10/30/2015 **Fuller Living Trust** \$100.00 Contributor address; City; State; Zip Code 17703 Wild Basin San Antonio, TX 78258-1613 Principal occupation / Job title (See Instructions) Employer (See Instructions)

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/6 Rpt: 5/31	
2	FILER NAME Lopez, Rayr			3	Filer ID	
4	Date 10/30/2015	 Full name of contributor out-of-state PAC (ID#:_Garza, Oscar Contributor address; City; State; Zip Code 2146 Cougar Pass Dr. San Antonio, TX 78230)		Amount of Contribution (\$)	\$500.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 10/30/2015	Full name of contributor out-of-state PAC (ID#:_Garza, Urania Contributor address; City; State; Zip Code 2146 Cougar Pass Dr. San Antonio, TX 78230)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/30/2015	Full name of contributor out-of-state PAC (ID#:_Gottsman, Charles Contributor address; City; State; Zip Code 2438 Freedom Drive San Antonio, TX 78217			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		W. C.
	Date 10/30/2015	Full name of contributor out-of-state PAC (ID#:_ Greiner, Donn Contributor address; City; State; Zip Code 4526 Black Oak Woods San Antonio, TX 78249-1455			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		The state of the s
	Date 10/30/2015	Full name of contributor out-of-state PAC (ID#:_ Hernandez, Jo Anna Contributor address; City; State; Zip Code 10911 Sangria Mist San Antonio, TX 78249)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
		·		or most		

annstagnical independent printer comm	MONET	TARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/31	
2	2 FILER NAME Lopez, Raynaldo			3	Filer ID	
4	Date 10/30/2015	 Full name of contributor out-of-state PAC (ID#:_Hernandez, John Contributor address; City; State; Zip Code 10911 Sangria Mist San Antonio, TX 78249-2579)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 10/30/2015	Full name of contributor out-of-state PAC (ID#:_ Holcomb M.D., John Contributor address; City; State; Zip Code 24348 Cherry Springs San Antonio, TX 78255			Amount of Contribution (\$)	\$75.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)		
	Date 10/30/2015	Full name of contributor out-of-state PAC (ID#: Linebarger Goggan Blair & Sampson, LLP Contributor address; City; State; Zip Code P.O. Box 17428			Amount of Contribution (\$)	\$500.00
		Austin, TX 78760				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/30/2015	Full name of contributor out-of-state PAC (ID#:_ Merck III, Gerald Contributor address; City; State; Zip Code 231 Bushbuck Path San Antonio, TX 78258-4904)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/30/2015	Full name of contributor out-of-state PAC (ID#: Merck, Micki Contributor address; City; State; Zip Code 231 Bushbuck Path)		Amount of Contribution (\$)	\$500.00
	Principal occu	San Antonio, TX 78258-4904 spation / Job title (See Instructions)	Employer (See Instructions)		TARA TERRATURA DE LA CONTRACTOR DE LA CONT

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/6 Rpt: 7/31	
2	FILER NAME Lopez, Rayr			3	Filer ID	
4	Date 10/30/2015	 Full name of contributor out-of-state PAC (ID#:_Reiland, Mike Contributor address; City; State; Zip Code 20848 Great Navajo San Antonio, TX 78257 		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 10/30/2015	Full name of contributor out-of-state PAC (ID#:_Rodriguez, Rudi Contributor address; City; State; Zip Code 10000 W. Commerce San Antonio, TX 78227-1303			Amount of Contribution (\$)	\$100.00
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/30/2015	Full name of contributor out-of-state PAC (ID#:_ Rohlfs, Paul Contributor address; City; State; Zip Code 2611 Eisenhauer Rd. #301 San Antonio, TX 78209			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/30/2015	Full name of contributor out-of-state PAC (ID#:_ San Antonio Fire & Police Pension Assoc. PAC Contributor address; City; State; Zip Code 11603 W. Coker Loop, Ste 201-A San Antonio, TX 78216)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/14/2015	Full name of contributor out-of-state PAC (ID#:_ Serna Jr., Baltazar Contributor address; City; State; Zip Code 126 Villita San Antonio, TX 78205)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/6 Rpt: 8/31	
2	FILER NAME Lopez, Rayn	aldo		3	Filer ID	
4	Date 10/30/2015	 5 Full name of contributor out-of-state PAC (ID#:_Sheldon, Lisa (Ms.) 6 Contributor address; City; State; Zip Code 4006 Green Oak Dr. Waco, TX 76710)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 10/30/2015	Full name of contributor out-of-state PAC (ID#:_Sheldon, Richard (Mr.) Contributor address; City; State; Zip Code 4006 Green Oak Dr. Waco, TX 76710)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
Magazina and Angel	Date 10/30/2015	Full name of contributor out-of-state PAC (ID#:_ Starr, David Contributor address; City; State; Zip Code 7334 Blanco Road San Antonio, TX 78216			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/14/2015	Full name of contributor out-of-state PAC (ID#:_ Stevens, Johnny Contributor address; City; State; Zip Code 8120 Killarney Court Wichita, KS 67206)		Amount of Contribution (\$)	\$500.00
ACCUM-	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/14/2015	Full name of contributor out-of-state PAC (ID#:_Stevens, Marjorie Contributor address; City; State; Zip Code 8120 Killarney Court Wichita, KS 67206)		Amount of Contribution (\$)	\$500.00
and the same	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	онно не в нестроительного постанование в нестроительного доступностью в нестроительного в нестроительного в не	
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	MONET	ARY POLITICAL CONTRIBUTION	SCHEDUL	E A1	
	The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A1: Sch: 6/6 Rpt: 9/31		
2	FILER NAME Lopez, Rayn	aldo		3 Filer ID	
4	Date 08/14/2015	 5 Full name of contributor out-of-state PAC (ID#:_TREPAC/Texas Association of Realtors 6 Contributor address; City; State; Zip Code P.O. Box 2246 Austin, TX 78768-2246)	7 Amount of Contribution (\$)	\$500.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
	Date 10/30/2015	Full name of contributor out-of-state PAC (ID#:_Villa, Manuel Contributor address; City; State; Zip Code 999 E. Basse Rd., Ste 180 San Antonio, TX 78209-1807)	Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	T	

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 10/31 2 FILER NAME 3 Filer ID Lopez, Raynaldo \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Date 6 Full name of contributor out-of-state PAC (ID#: 8 Amount of 9 In-kind contribution contribution (\$) description 10/06/2015 Mery, George \$500.00 Rental of Passenger Van 7 Contributor address; City; State; Zip Code for National Night Out 5157 Event Blanco Rd., Bldg. E San Antonio, TX 78216 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Fees Food/Beverage Expense Gift/Awards/Memorials Exper Legal Services The Instruction Guide 6	Pollir nse Printi Salar	g Expensi ng Expensi ies/Wages	se s/Contract Labor		Transportation Equipment & Related Expens Travel out of District OTHER (enter a category not listed above)	se
<u> </u>		T	The Instruction Guide 6	explains now to	Compi	ete triis iorm.	T_		
1	Total pages Schedule F1: Sch: 1/21 Rpt: 11/31	Lopez, Ra					3	Filer ID	
4	Date	5 Payee nam	e						
	08/17/2015	AT&T Mob							
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip	Code				
	\$656.68	PO Box 53	37104						
68000000000000000000000000000000000000		Atlanta, G	A 30353-7104						
8	PURPOSE	(a) Category	See Categories listed at the top	of this echodulo)	(b)	Description			
BHOSSING	OF	1	erhead/Rental Expens		``		outsid	de of Texas. Complete Schedule T.	
	EXPENDITURE		,					officeholder living expense	
						Campaign Pl	hon	es (2 months)	
	•								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		fficeholder name	Office	sought			Office held	
	Date	Payee nam	е						
	08/18/2015	AT&T Mob	oility						
<u> </u>	Amount (\$)	Payee addr	ess; City;	State; Zip	Code				
	\$656.68	PO Box 53		·					
		Atlanta, G	A 30353-7104						
	PURPOSE	(a) Category (See Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE	Office Ove	rhead/Rental Expens	e		L		de of Texas. Complete Schedule T.	
						ii		officeholder living expense es (double payment posted as	
								uture monthly charges)	
	Camplete ONLY if direct	Candidata/O	ficeholder name	Office					
	Complete ONLY if direct expenditure to benefit C/Ol		fficeholder name	Office	sougnt			Office held	
	Date	Payee nam	e		MATERIAL PROPERTY AND ADDRESS OF THE PARTY O				EAST-MANAGEMENT COMME
acceptance of	11/05/2015	AT&T Mob							
_	Amount (\$)	Payee addr	ess; City;	State; Zip	Code				
DESCRIPTION OF THE PROPERTY OF	\$38.13	PO Box 53	•	, ,					

		Atlanta, G	A 30353-7104						
No.	PURPOSE OF		See Categories listed at the top		(b)	Description			
and a second	EXPENDITURE	Office Ove	rhead/Rental Expens	e		Lance I		de of Texas. Complete Schedule T. officeholder living expense	
and						Campaign Pl			
						Jampaigiiii			
<u> </u>	Complete ONLY if direct	Candidata/Of	ficeholder name	Office	sought			Office held	
	expenditure to benefit C/OI		ncentiuei name	Onice	sougni			Office field	
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- CHARLES		THE RESERVE OF THE PARTY OF THE							THE RESERVE OF THE PARTY WATER

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Com Credit Card Payment		
	Cleun Caru Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 2/21 Rpt: 12/31	2 FILER NAME Lopez, Raynaldo 3 Filer ID
4	Date 12/15/2015	5 Payee name AT&T Mobility
6	Amount (\$) \$221.45	7 Payee address; City; State; Zip Code PO Box 537104 Atlanta, GA 30353-7104
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Phones
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/20/2015	Best Buy
A CONTRACTOR OF THE CONTRACTOR	Amount (\$) \$216.49	Payee address; City; State; Zip Code 5419 W. Loop 1604.N. San Antonio, TX 78253
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Laptop Computer for Campaign
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date 10/06/2015	Payee name Elegant Limousine & Charter
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 5157 Blanco Rd. Building E San Antonio, TX 78216
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Rental of Passenger Van for National Night Out Event
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 3/21 Rpt: 13/31	Lopez, Raynaldo
4	Date	5 Payee name
AND THE PERSON NAMED IN COLUMN	10/01/2015	Farias, Gabriel
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	12119
	!	Jimmer Cove
Name of the least		San Antonio, TX 78221
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee Campaign Contribution
		Campaign Contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	07/10/2015	Gonzales, Patricia (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$750.00	7407
		Sunscape Way
		San Antonio, TX 78250
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Campaign Support Staff
		Campaign Support Stan
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	
-	Date	Payee name
	10/10/2015	Gonzales, Patricia (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$450.00	7407
		Sunscape Way
		San Antonio, TX 78250
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Caregory (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Chy Description Chy Description Chy Description
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Support Staff
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
<u></u>	experience to benefit c. c.	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		kpense /ages/C	Contract Labor e this form.	Travel in District Travel Out of District OTHER (enter a category not listed	d above)
1	Total pages Schedule F1:	2 FILER NAMI	<u> </u>			1.	3 Filer ID	
_	Sch: 4/21 Rpt: 14/31	Lopez, Ray						
4	Date	5 Payee name	2					
	07/05/2015	HEB						
6	Amount (\$)	7 Payee addre	ess; City; State	; Zip Co	de			
	\$53.00	9255 Griss	-	,				
		San Antoni	o, TX 78250					
8	PURPOSE	(a) Category (S	See Categories listed at the top of this scl	nedule)	(b) [Description		
	OF EXPENDITURE		tion Equipment & Related		[<u></u>	utside of Texas. Complete Schedule T.	
		Expense			Ļ	☐ Check if Austin, 「ravel in Distr	TX, officeholder living expense	
						navenin Disti	IUI	
<u> </u>							060	
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ght		Office held	
	Date	Payee name	2					
	08/01/2015	HEB						
	Amount (\$)	Payee addre	ess; City; State	; Zip Co	de			
	\$50.00	9255 Griss	· ·	•				
	·							
		San Antoni	o, TX 78250					
	PURPOSE	(a) Category (S	See Categories listed at the top of this scl	nedule)	(b) [Description		
	OF EXPENDITURE	-	tion Equipment & Related		ַ		utside of Texas. Complete Schedule T.	
		Expense			Ļ	Check if Austin, Travel in Distr	TX, officeholder living expense	
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	Complete ONLY if direct	Candidata/Off	iooholdor name	Office seri	abt		Office held	Mikkahikan an anara an arawa an arawa aka kanifersa anarak an ang
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	ynı		Onice neid	
	Date	Payee name)					
	08/09/2015	HEB						
_	Amount (\$)	Payee addre	ess; City; State	; Zip Co	de	Management of the Company of the Com		0.4884444444444444444444444444444444444
	\$49.07	9255 Griss	-	, Др СО	40			
	Ψ+3.07	2233 G1135	om Nu					
		San Antoni	o, TX 78250					
	PURPOSE	(a) Category (S	See Categories listed at the top of this sch	nedule)	(b) [Description		
	OF EXPENDITURE		tion Equipment & Related		[utside of Texas. Complete Schedule T.	
		Expense			Ĺ	Check if Austin, Travel in Distr	TX, officeholder living expense	
					1	i i avei ili Disti	ICL	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		iceholder name	Office sou	ght		Office held	
	Superiord to bonom of the							

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME 3	Filer ID
	Sch: 5/21 Rpt: 15/31	Lopez, Raynaldo	
4	Date 08/15/2015	5 Payee name HEB	
6	Amount (\$) \$30.00	7 Payee address; City; State; Zip Code 9255 Grissom Rd San Antonio, TX 78250	
8	PURPOSE OF EXPENDITURE	Transportation Equipment & Related	ide of Texas. Complete Schedule T. , officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 08/22/2015	Payee name HEB	
	Amount (\$) \$40.09	Payee address; City; State; Zip Code 9255 Grissom Rd San Antonio, TX 78250	
	PURPOSE OF EXPENDITURE	Transportation Equipment & Related	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 08/28/2015	Payee name HEB	
	Amount (\$) \$65.00	Payee address; City; State; Zip Code 9255 Grissom Rd San Antonio, TX 78250	
O ESTANCIONE DE CONTROLLE DE TOTAL CONTROLLE DE TOT	PURPOSE OF EXPENDITURE	Transportation Equipment & Related	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
Office and the second s			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide ex	Salaries/Wa	oense ages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:					3 Filer ID	
	Sch: 6/21 Rpt: 16/31	Lopez, R	aynaldo				
4	Date	5 Payee nar	ne				-
	09/10/2015	HEB					
6	Amount (\$)	7 Payee add	lress; City;	State; Zip Cod	le		
	\$50.00	9255 Gris	ssom Rd				
		San Anto	nio, TX 78250				
8	PURPOSE OF	(a) Category	(See Categories listed at the top of	this schedule)	(b) Description		
	EXPENDITURE		tation Equipment & Rela	nted	<u> </u>	outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
		Expense			Travel in Dis		
9	Complete ONLY if direct		Officeholder name	Office soug	ht	Office held	
	expenditure to benefit C/OI	1					
	Date	Payee nar	ne				
	09/10/2015	HEB					
	Amount (\$)	Payee add	lress; City;	State; Zip Coo	le		
	\$52.52	9255 Gris	ssom Rd				
		San Anto	nio, TX 78250				
	PURPOSE	(a) Category	(See Categories listed at the top of	this schedule)	b) Description		
	OF EXPENDITURE		tation Equipment & Rela	ited		outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
		Expense			Travel in Dis		
	Complete ONLY if direct		Officeholder name	Office soug	ht	Office held	November 1
	expenditure to benefit C/OI	4					
	Date	Payee nar	ne				
	09/17/2015	HEB					
	Amount (\$)	Payee add	lress; City;	State; Zip Coo	le		
	\$20.00	9255 Gris	ssom Rd				
		San Anto	nio, TX 78250				
	PURPOSE OF		(See Categories listed at the top of		b) Description		
	EXPENDITURE		tation Equipment & Rela	ited	brauel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
		Expense			Travel in Dis		
	Complete ONLY if direct		Officeholder name	Office soug	ht	Office held	
	expenditure to benefit C/OH	4					
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SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Gift/Awards/Memori Legal Services The Instruction			Wages	/Contract Labor		Travel Out of District OTHER (enter a category not listed above))
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	-
	Sch: 7/21 Rpt: 17/31		Lopez, Rayr								
4	Date	5	Payee name								
	09/24/2015		HEB								
6	Amount (\$)	7	Payee addres	ss; City;	State	; Zip Co	ode				
	\$47.00		9255 Grisso	m Rd							
			San Antonio	, TX 78250							
8	PURPOSE	(a)	Category (Se	e Categories listed	at the top of this sch	nedule)	(b)	Description			
	OF EXPENDITURE		•	on Equipmen	t & Related			<u></u>		e of Texas. Complete Schedule T. officeholder living expense	
		-	Expense					Travel in Dist		incertoider living expense	

9	Complete ONLY if direct	<u></u>	Candidate/Offic	ceholder name	(Office sou	Jaht			Office held	
	expenditure to benefit C/O						-9				
Т	Date		Payee name								
	09/29/2015	***************************************	HEB								
	Amount (\$)	T	Payee addres	s; City;	State	; Zip Co	ode				
	\$41.70		9255 Grisso	m Rd							
		TO THE PERSON NAMED IN	San Antonio	, TX 78250							
	PURPOSE	(a)	Category (Se	e Categories listed a	at the top of this sch	nedule)	(b)	Description			
	OF EXPENDITURE		•	on Equipmen	t & Related					e of Texas. Complete Schedule T.	
			Expense				9	Travel in Disti		fficeholder living expense	
A CONTRACTOR OF THE PERSON OF								Travel III Dist	., 101		
	Complete ONLY if direct		Candidate/Offic	eholder name	(Office sou	<u>l</u> Jaht			Office held	
	expenditure to benefit C/OF	Н					Ü				
	Date	T	Payee name								
	10/05/2015		HEB								
	Amount (\$)	T	Payee addres	ss; City;	State	; Zip Co	ode				MAA waxay ayaa ahaa da AAAA AAAA AAAA AAAA AAAA AAAA
	\$48.00	Mary September 19	9255 Grisso	m Rd							
SO POR CONTRACTOR OF THE PROPERTY OF THE PROPE											
			San Antonio	, TX 78250							
	PURPOSE	(a)	Category (Se	e Categories listed a	at the top of this sch	nedule)	(b)	Description			
	OF EXPENDITURE			on Equipmen	t & Related					e of Texas. Complete Schedule T. officeholder living expense	
		-	Expense					Travel in Disti		inicential living expense	
									•		
	Complete ONLY if direct		Candidate/Offic	eholder name	(Office sou	<u>l</u> ught			Office held	
al Accompany	expenditure to benefit C/OF				`	25 550	J			- ··· · · · • · •	
_						<u> , , , , , , , , , , , , , , , , , , ,</u>			***************************************		
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (perfor a category not listed above)

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 8/21 Rpt: 18/31	Lopez, Raynaldo
4	Date	5 Payee name
	10/10/2015	HEB
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$40.40	9255 Grissom Rd
		San Antonio, TX 78250
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
Newspecture of the second of t	OF EXPENDITURE	Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T.
HISTOCOMPIE		Expense Check if Austin, TX, officeholder living expense Travel in District
	,	Travol il Biodici
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
AND THE PROPERTY OF THE PROPER	expenditure to benefit C/OF	
	Date	Payee name
	10/11/2015	HEB
_	Amount (\$)	Payee address; City; State; Zip Code
	\$33.00	7951
		Guilbeau Rd.
		San Antonio, TX 78250
_	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment & Related
	bu/At mitter () w	Expense Check if Austin, TX, officeholder living expense Travel in District
		Havelin District
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	
	Date	Payee name
Executive was	10/16/2015	HEB
_	Amount (\$)	Payee address; City; State; Zip Code
	\$70.02	7951
		Guilbeau Rd.
		San Antonio, TX 78250
	PURPOSE	
NAME OF TAXABLE PARTY.	OF	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related (b) Description Check if travel outside of Texas. Complete Schedule T.
CONTRACTOR OF	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense
100000000000000000000000000000000000000		Travel in District
Consideration of the Constant	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	nmittee L	Gift/Awards/Memorials Ex egal Services The Instruction Guid			ages/	Contract Labor	Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME						3 Filer ID	
	Sch: 9/21 Rpt: 19/31		Lopez, Rayn	aldo						
4	Date	5	Payee name							
	10/18/2015		HEB							
6	Amount (\$)	7	Payee address	s; City;	State;	Zip Cod	de			
	\$13.00		7951							
		1	Guilbeau Rd							
			San Antonio,							
_		┞——					4.			
8	PURPOSE OF	3		Categories listed at the t		dule)	(b)	Description	which of Taylor Campleto Cabadala T	
	EXPENDITURE			on Equipment & F	Related			<u> </u>	utside of Texas. Complete Schedule T. TX, officeholder living expense	
			Expense				ı	Travel in Distr		
						ĺ				
9	Complete ONLY if direct	<u> </u>	Candidate/Office	shalder name	Of	fice soug	nht.		Office held	
9	expenditure to benefit C/O		zandidate/Onici	enoluer name		nce soug	JIIL		Office field	
	Date		Payee name							
	10/23/2015		HEB							
_	Amount (\$)		Payee address	s; City;	State;	Zip Cod	de			
	\$41.00		9255			•				
	·		Grissom Rd.							
				TV 702E0						
		9	San Antonio,	17 10230						
		<u> </u>	·····							
	PURPOSE			Categories listed at the t		dule)	(b)	Description		
	PURPOSE OF EXPENDITURE		Transportation			dule)	(b)	Check if travel o	utside of Texas, Complete Schedule T.	
	OF			Categories listed at the t		dule)		Check if travel o	TX, officeholder living expense	
	OF		Transportation	Categories listed at the t		dule)		Check if travel o	TX, officeholder living expense	
	OF EXPENDITURE		Transportatic Expense	Categories listed at the ton Equipment & F	Related			Check if travel o	TX, officeholder living expense	
	OF	C	Transportation	Categories listed at the ton Equipment & F	Related	dule) (Check if travel o	TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh	C	Transportatic Expense	Categories listed at the ton Equipment & F	Related			Check if travel o	TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh	- C	Transportation Expense Candidate/Office Payee name	Categories listed at the ton Equipment & F	Related			Check if travel o	TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh	- C	Transportation Expense Candidate/Office	Categories listed at the ton Equipment & F	Related			Check if travel o	TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh	- C	Transportation Expense Candidate/Office Payee name	Categories listed at the ton Equipment & F	Related		ght	Check if travel o	TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 10/26/2015	- C	Transportation Expense Candidate/Office Payee name HEB	Categories listed at the ton Equipment & F	Related	fice soug	ght	Check if travel o	TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFD Date 10/26/2015 Amount (\$)	С	Transportation Expense Candidate/Office Payee name HEB Payee address	Categories listed at the ton Equipment & F	Related	fice soug	ght	Check if travel o	TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFD Date 10/26/2015 Amount (\$)	C	Transportation Expense Candidate/Office Payee name HEB Payee address 9255 Grissom Rd.	Categories listed at the ton Equipment & February Equipment in Equipment is a second control of the control of	Related	fice soug	ght	Check if travel o	TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 10/26/2015 Amount (\$) \$44.00	C	Transportation Expense Candidate/Office Payee name HEB Payee address 9255 Grissom Rd. San Antonio,	Categories listed at the ton Equipment & Fon E	Off State;	fice soug	ght de	Check if travel o	TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 10/26/2015 Amount (\$) \$44.00 PURPOSE OF	(a)	Transportation Expense Candidate/Office Payee name HEB Payee address 9255 Grissom Rd. San Antonio, Category (See	Categories listed at the ton Equipment & Fon E	Off State;	fice soug	ght de	Check if travel of Check if Austin, Travel in Distr	TX, officeholder living expense ict Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 10/26/2015 Amount (\$) \$44.00	(a)	Transportation Expense Candidate/Office Payee name HEB Payee address 9255 Grissom Rd. San Antonio, Category (See	Categories listed at the ton Equipment & Fon E	Off State;	fice soug	ght de	Check if travel of Check if Austin, Travel in Distr	TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 10/26/2015 Amount (\$) \$44.00 PURPOSE OF	(a)	Transportation Expense Candidate/Office Payee name HEB Payee address 9255 Grissom Rd. San Antonio, Category (see Transportation	Categories listed at the ton Equipment & Fon E	Off State;	fice soug	ght (b)	Check if travel of Check if Austin, Travel in Distr	TX, officeholder living expense ict Office held utside of Texas. Complete Schedule T. TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 10/26/2015 Amount (\$) \$44.00 PURPOSE OF	(a)	Transportation Expense Candidate/Office Payee name HEB Payee address 9255 Grissom Rd. San Antonio, Category (see Transportation	Categories listed at the ton Equipment & Fon E	Off State;	fice soug	ght (b)	Check if travel of Check if Austin, Travel in Distr Description Check if travel of Check if Austin,	TX, officeholder living expense ict Office held utside of Texas. Complete Schedule T. TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 10/26/2015 Amount (\$) \$44.00 PURPOSE OF EXPENDITURE	(a)	Transportation Expense Candidate/Office Payee name HEB Payee address 9255 Grissom Rd. San Antonio, Category (see Transportation	Categories listed at the ton Equipment & Fon E	Off State; op of this sched	fice soug	 de (b)	Check if travel of Check if Austin, Travel in Distr Description Check if travel of Check if Austin,	TX, officeholder living expense ict Office held utside of Texas. Complete Schedule T. TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 10/26/2015 Amount (\$) \$44.00 PURPOSE OF	(a)	Transportation Expense Candidate/Office Payee name HEB Payee address 9255 Grissom Rd. San Antonio, Category (see Transportation Expense	Categories listed at the ton Equipment & Fon E	Off State; op of this sched	fice soug	 de (b)	Check if travel of Check if Austin, Travel in Distr Description Check if travel of Check if Austin,	TX, officeholder living expense ict Office held utside of Texas. Complete Schedule T. TX, officeholder living expense ict	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 10/26/2015 Amount (\$) \$44.00 PURPOSE OF EXPENDITURE	(a)	Transportation Expense Candidate/Office Payee name HEB Payee address 9255 Grissom Rd. San Antonio, Category (see Transportation Expense	Categories listed at the ton Equipment & Fon E	Off State; op of this sched	fice soug	 de (b)	Check if travel of Check if Austin, Travel in Distr Description Check if travel of Check if Austin,	TX, officeholder living expense ict Office held utside of Texas. Complete Schedule T. TX, officeholder living expense ict	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Oh Date 10/26/2015 Amount (\$) \$44.00 PURPOSE OF EXPENDITURE	(a)	Transportation Expense Candidate/Office Payee name HEB Payee address 9255 Grissom Rd. San Antonio, Category (see Transportation Expense	Categories listed at the ton Equipment & Fon E	Off State; op of this sched	fice soug	 de (b)	Check if travel of Check if Austin, Travel in Distr Description Check if travel of Check if Austin,	TX, officeholder living expense ict Office held utside of Texas. Complete Schedule T. TX, officeholder living expense ict	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER Contract a category pet listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 10/21 Rpt: 20/31	Lopez, Raynaldo	
4	Date 11/03/2015	5 Payee name HEB	
6	Amount (\$) \$41.00	7 Payee address; City; State; Zip Code 9255 Grissom Rd. San Antonio, TX 78250	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel in District	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date 11/10/2015	Payee name HEB	
ATTENDED TO THE PROPERTY OF TH	Amount (\$) \$51.40	Payee address; City; State; Zip Code 9255 Grissom Rd. San Antonio, TX 78250	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel in District	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date 11/20/2015	Payee name HEB	
	Amount (\$) \$34.75	Payee address; City; State; Zip Code 9255 Grissom Rd. San Antonio, TX 78250	
A THE RESERVE THE PROPERTY OF	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel in District	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Polling Exper Printing Expe Salaries/Wag	nse es/Contract Labor		Travel Out of District OTHER (enter a category not listed above)				
Ļ		la euconi	The Instruction Guide explain	is now to comp	nete this form.	Т_				
1	Total pages Schedule F1:					3	Filer ID			
	Sch: 11/21 Rpt: 21/31	Lopez, Ra		10.000 No.000 No.00		<u> </u>				
4	Date 11/23/2015	5 Payee nam HEB	e							
6	Amount (\$)	7 Payee addr	ess; City; Stat	te; Zip Code	<u>.</u>	**********				
	\$63.51	9255		•						
	·	Grissom R	rd.							
			io, TX 78250							
Ļ				1,,						
8	PURPOSE OF	i	See Categories listed at the top of this s	chedule) (b	Description	nutn	ide of Texas. Complete Schedule T.			
COLORINA	EXPENDITURE	Transporta Expense	ation Equipment & Related		<u></u>		, officeholder living expense			
		Lybelise			Travel in Dis					
9	Complete ONLY if direct	Candidate/O	ficeholder name	Office sough	t		Office held			
5	expenditure to benefit C/OI		meeriolaer name	Office Sough			Office field			
	Date	Payee nam	е							
	11/30/2015	HEB								
_	Amount (\$)	Payee addr	ess; City; Stat	te; Zip Code	!					
101000000000000000000000000000000000000	\$98.00	2118	· •	•						
	,	Fredericks	hura Rd							
			io, TX 78201							
<u> </u>										
	PURPOSE OF		See Categories listed at the top of this s	chedule) (b) Description		the (Tours Country Orbertals T			
	EXPENDITURE	Solicitation	n/Fundraising Expense				ide of Texas. Complete Schedule T.			
					Check if Austin, TX, officeholder living expense Postage Stamps					
					9					
<u> </u>	Complete ONLY if direct	Candidate/O	ficeholder name	Office sough	*	***************************************	Office held			
	expenditure to benefit C/O		neerloider name	Office 30ugii	·		Office field			
<u> </u>		- 10 MARIE								
	Date	Payee nam	e							
	12/01/2015	HEB								
	Amount (\$)	Payee addr	ess; City; Stat	te; Zip Code						
	\$36.15	9255								
		Grissom R	d.							
		San Anton	io, TX 78250							
-	PURPOSE				1 0					
NOTION TO SECURITION OF SECURI	OF	'	See Categories listed at the top of this s	chedule)	Description Check if travel	outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE	Expense	ation Equipment & Related				, officeholder living expense			
00000000					Travel in Dis					
TO TO THE PARTY OF										
_	Complete ONLY if direct	Candidate/O	ficeholder name	Office sough	t	-	Office held			
	expenditure to benefit C/OI		-	9						
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nittee L	Food/Beverage Exp Sift/Awards/Memor Legal Services The Instruction			Expens Wages	se s/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above))
1	Total pages Schedule F1:	2 FII	ILER NAME	***************************************					3	Filer ID	
	Sch: 12/21 Rpt: 22/31	Lo	opez, Rayn	aldo							
4	Date	5 Pa	ayee name								PROGRESSION STATES
	12/10/2015	Н	IEB								
6	Amount (\$)	7 Pa	ayee address	s; City;	State	e; Zip Co	ode	And Commission and Andrews Commission Control of the Advance of the Commission Commissio	POLITICALISMO		
	\$50.00	82	219								
		M	1arbach Rd.	ı							
		Sa	an Antonio,	TX 78227							
8	PURPOSE	(a) Ca	ategory (See	Categories listed	at the top of this sc	chedule)	(b)	Description	-		
	OF EXPENDITURE			s/Donations		! _				de of Texas. Complete Schedule T. officeholder living expense	
micromanopolic de la composição de la co	!	C	andidate/O	fficeholaen	Political Comr	nιπee				On Holiday Event	•
	1									,	
9	Complete ONLY if direct expenditure to benefit C/Oh		ndidate/Office	eholder name		Office sou	J Jght			Office held	
	Date	Pε	ayee name								
	12/14/2015	Н	IEB								
	Amount (\$)	Pa	ayee address	s; City;	State	e; Zip Co	ode	Annual Control of the	***************************************		**************************************
A A DE LA COLOR DE	\$50.00	92	255								
	,	Gı	Grissom Rd.							•	
		Sa	an Antonio,	TX 78250							
	PURPOSE	(a) Ca	ategory (See	Categories listed	at the top of this sc	chedule)	(b)	Description	***************************************		***************************************
	OF EXPENDITURE	Tr	ransportatio	on Equipmen				<u></u>		de of Texas. Complete Schedule T.	
	•	E	xpense					Travel in Dist		officeholder living expense	
	!										
	Complete ONLY if direct expenditure to benefit C/Oh		ndidate/Office	eholder name	M	Office sou	<u>I</u> ught		***************************************	Office held	Management and the second
	Date	Pe	ayee name	MORROW SPECIAL PROPERTY AND ADDRESS OF THE SPECIAL PROPERTY ADDRESS OF THE SPECIAL PRO		COOL DE LE COMPANIE DE LA COMPANIE D		2	Management of the last of the		
	12/24/2015	Н	IEB								
	Amount (\$)	Pa	ayee address	s; City;	State	e; Zip Co	ode		No.		
	\$68.00	92	255								
	!	Gı	Frissom Rd.								
		Sa	an Antonio,	TX 78250							
	PURPOSE	(a) Ca	ategory (See	Categories listed	at the top of this sc	hedule)	(b)	Description	***************************************	оружина и поторужина на по	100
	OF EXPENDITURE			on Equipmen	ıt & Related					de of Texas. Complete Schedule T. officeholder living expense	
		E)	xpense					Travel in Dist			
	Complete ONLY if direct expenditure to benefit C/Oh		ndidate/Office	eholder name		Office sou	<u>l</u> ught			Office held	
_	Bett Addition (Control of the Control of the Contro	In the second se				Brown Barry Company of the Company o	BOOM 100 100 100 100 100 100 100 100 100 10	скомплинування украничний этипата положення за	DEMONSTRATION		WORKS CONTROL
massic cons											
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services The Instruction G	,		ages/	/Contract Labor	OTHER (enter a catego	ry not listed above)
1	Total pages Schedule F1:	2	FILER NAME						3 Filer ID	
	Sch: 13/21 Rpt: 23/31		Lopez, Rayı							
4	Date	5	Payee name							
	12/24/2015		HEB							
6	Amount (\$)	7	Payee addres	ss; City;	State	e; Zip Co	de			
	\$246.77		9255							
V 1000.40			Grissom Rd	l.						
			San Antonio	o, TX 78250						
8	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this so	chedule)	(b)	Description		
	OF EXPENDITURE			age Expense	·			<u></u>	outside of Texas. Complete So	
	LAFEINDITORE								TX, officeholder living expens	se
						Į		Homeowners	group event	
		<u> </u>			· · · · · · · · · · · · · · · · · · ·					
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name		Office sou	ght		Office held	
_	Date	_	Deve = #							
	07/07/2015		Payee name Halftime Piz	773						
		<u> </u>								
	Amount (\$)		Payee addres		State	e; Zip Co	de			
	\$169.00		7126 Tezel	Ra.						
			San Antonio	o, TX 78250						
	PURPOSE OF	(a)	Category (Se	ee Categories listed at	the top of this so	chedule)	(b)	Description		
	EXPENDITURE		Food/Bever	age Expense		Î			outside of Texas. Complete So TX, officeholder living expens	
						l		-	aff Appreciation	SC .
								Campaign St	an Appreciation	
_	Complete ONLY if direct	Ц,	Candidate/Offi	ceholder name		Office sou	aht		Office held	
	expenditure to benefit C/OI		Januluale/Oni	cerioidei name		Onice sou	grit		Office field	
_									dens	
	Date		Payee name							
	07/23/2015		Halftime Piz	za		parokune assummana summersi dibit.				
	Amount (\$)		Payee addres	•	State	e; Zip Co	de			
es control or designation of the control of the con	\$38.00		7126 Tezel	Rd.						
			San Antonio	o, TX 78250						
	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this so	chedule)	(b)	Description		
	OF EXPENDITURE		Food/Bever	age Expense		İ		L	outside of Texas. Complete So	
								<u></u>	TX, officeholder living expens	
SOLD STREET, S								Campaign Sta	an volunteer weetin	9
	Complete ONLY Eding	<u></u>	20 m ali al c + - 10 ff			Office	~ h +		Office bala	
Section of the sectio	Complete ONLY if direct expenditure to benefit C/OI		Jandidate/Offic	ceholder name		Office sou	ynt		Office held	
		onserved	annon summitte and beginning the summitted beauty						en particular de la compactica de la com	
1										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense

Consulting Expense
Contributions/ Donations Made By -

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a The Instruction Guide explains how to complete this form.	category not listed above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
no construction of the con	Sch: 14/21 Rpt: 24/31	Lopez, Raynaldo	
4	Date	5 Payee name	
	08/14/2015	Halftime Pizza	
6	Amount (\$) \$47.00	7 Payee address; City; State; Zip Code 7126 Tezel Rd. San Antonio, TX 78250	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
HECOREGICALISM AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS O	OF EXPENDITURE	Food/Beverage Expense	
		Check if Austin, TX, officeholder living Campaign Staff/Volunteer M	
		Campaign Stan Volunteer M	cenny
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office he	ıld
	Date	Payee name	
	09/14/2015	Halftime Pizza	
	Amount (\$)	Payee address; City; State; Zip Code	And the second s
NO CAMPAGNIC	\$31.00	7126 Tezel Rd.	
		San Antonio, TX 78250	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Fond/Beverage Expense (Company) Check if travel outside of Texas. Company)	olete Schadula T
ON CONTRACTOR OF THE CONTRACTO	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Comp Check if Austin, TX, officeholder living	
		Campaign Staff/Volunteer M	
A TOTAL CONTRACTOR OF THE CONT	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office he	·ld
	Date	Payee name	
NACCESTRATES AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF	09/20/2015	Halftime Pizza	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$49.80	7126 Tezel Rd.	
200	!	San Antonio, TX 78250	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Comp	
		Campaign Staff/Volunteer M	· ·
distribution of the second			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office he	ıld
	expenditure to benefit C/O		
_			AND

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	arean sara r ayment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 15/21 Rpt: 25/31	2 FILER NAME Lopez, Raynaldo 3 Filer ID
4	Date	5 Payee name
·	10/27/2015	Halftime Pizza
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$38.00	7126 Tezel Rd.
_		San Antonio, TX 78250
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Staff/Volunteer Meeting
9	Complete ONLY if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held
eschoezen	Date	Payee name
	08/03/2015	Longhorn Steakhouse
	Amount (\$)	Payee address; City; State; Zip Code
	\$260.00	5706
		W 1604 N
		San Antonio, TX 78251
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	E/II EIIOII OILE	Check if Austin, TX, officeholder living expense
		Campaign Staff Appreciation
o er ekskouwe	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/26/2015	Lucky's Sports Bar & Grill
	Amount (\$)	Payee address; City; State; Zip Code
	\$119.00	18100
		FM 306
		Canyon Lake, TX 78133
NACHE WAR	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Staff Appreciation
		Campaign Cam Application
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
accessor in a conse		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1		
	Sch: 16/21 Rpt: 26/31	Lopez, Raynaldo
4		5 Payee name
	08/03/2015	Northwest Democrats of Bexar County PAC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	8760
		Cross Mountain Trail
		San Antonio, TX 78255
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	l	Awards Dinner
	l	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	11/14/2015	Papa John's Restaurant
	Amount (\$)	Payee address; City; State; Zip Code
	\$176.18	11823
	!	Culebra Rd.
		San Antonio, TX 78253
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
en company	!	Homeowners Group Event
	!	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
o i pod dos altitud	12/04/2015	San Antonio Food Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	5200
		W. Us Hwy 90
NAME OF THE OWNER, WHEN THE OW		San Antonio, TX 78227
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder Check if Austin, TX, officeholder living expense
		Donate 10 turkeys to Outreach Centers
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
<u> </u>		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						pense xpens Vages	e /Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)			
<u> </u>		Γ_			ilue explains i	11000 10 00	mpie	te this form.	1_	E1 ID			
1	Total pages Schedule F1: Sch: 17/21 Rpt: 27/31	2	Lopez, Ray						3	Filer ID			
4	Date	_							<u> </u>				
7	11/24/2015	3	Payee name San Antoni	o Food Bank									
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Co	de	Mary Mary Control of the M	*****				
	\$240.00		5200										
			W. Us Hwy	90									
			-	o, TX 78227									
8	PURPOSE	(a)	Category (S	See Categories listed at th	ne top of this sch	edule)	(b)	Description					
	OF EXPENDITURE			ns/Donations Ma		·		<u></u>		de of Texas. Complete S			
	LAI ENDITORE		Candidate/	Officeholder/Poli	tical Comm	ittee		Land 1		officeholder living expen			
								Columbus Fo		ce of Peace Chu Drive	rcn Knights of		
		L						Coldinbus i					
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	ficeholder name	C	Office sou	ght			Office held			
	Date		Payee name	:									
	07/01/2015		Tezel Mark	et									
	Amount (\$)	_	Payee addre	ess; City;	State;	Zip Co	de			and a second			
	\$49.00		7126 Tezel	Rd.									
			San Antoni	o, TX 78250									
	PURPOSE	(a)	Category (S	See Categories listed at th	ne top of this sch	edule)	(b)	Description					
	OF EXPENDITURE			tion Equipment &						de of Texas. Complete S			
	LAFENDITORE	Expense					Check if Austin, TX, officeholder living expense Travel in District						
								ravei in dist	trict				
	an da kirki katikan marakala sasar dari sala salah kirki da kirki kada samawa masa kirki da kirki da kira mara												
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Off	ficeholder name	C	Office sou	ght			Office held			
	experience to benefit 6/01												
	Date		Payee name	:		 							
	07/10/2015		Tezel Mark	et									
	Amount (\$)		Payee addre	ess; City;	State;	Zip Co	de						
	\$69.00		7126 Tezel	Rd.									
			San Antoni	o, TX 78250									
_	PURPOSE	(a)	Category (S	See Categories listed at th	ne top of this sch	edule)	(b)	Description					
	OF EXPENDITURE			tion Equipment &	& Related			Lange II		de of Texas. Complete S			
			Expense					bacacci		officeholder living expen	se		
								Travel in Dist	uiUl				
		L		** 1 1 1	_		<u> </u>						
	Complete ONLY if direct expenditure to benefit C/OF		Jandidate/Off	iceholder name	C	Office sou	gnt			Office held			
	MANAGARAN M	eri serieta ida i					Marie Control		***************************************				

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Legal Serv	s/Memorials Expense vices ruction Guide expl		Vages	/Contract Labor	Travel Out of District OTHER (enter a category n	ot listed above)
1	Total pages Schedule F1: Sch: 18/21 Rpt: 28/31		NAME z, Raynaldo					3 Filer ID	-
4	Date	<u> </u>			· · · · · · · · · · · · · · · · · · ·	************			
4	07/13/2015	5 Payee Tezel	name Market						
6	Amount (\$) \$63.01		address; (Tezel Rd. Antonio, TX 78		itate; Zip Co	ode			
8	PURPOSE OF EXPENDITURE		portation Equ	ies listed at the top of th		(b)		utside of Texas. Complete Scheo TX, officeholder living expense ICT	tule T.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ate/Officeholde	name	Office sou	ight		Office held	
Г	Date	Payee	name						
(MATERIAL PROPERTY)	07/18/2015	Tezel	Market						
	Amount (\$) \$73.73	-	address; (Tezel Rd.	City; S	itate; Zip Co	ode			
		San A	ntonio, TX 78	3250					
	PURPOSE OF EXPENDITURE		portation Equ	ies listed at the top of th		(b)		utside of Texas. Complete Scheo TX, officeholder living expense ict	tule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		ate/Officeholde	r name	Office sou	ight		Office held	
The state of the s	Date 07/24/2015	•	name Market						
	Amount (\$) \$80.09	7126	address; (Tezel Rd. Antonio, TX 78		itate; Zip Co	ode			
	PURPOSE OF EXPENDITURE		portation Equ	ies listed at the top of th		(b)		utside of Texas. Complete Scheo TX, officeholder living expense ict	dule T.
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		ate/Officeholde	name	Office sou	ight		Office held	
October 1000 (Indicated Parket									

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID				
	Sch: 19/21 Rpt: 29/31	Lopez, Raynaldo				
4	Date	5 Payee name				
	08/01/2015	Tezel Market				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$56.00	7126 Tezel Rd.				
		San Antonio, TX 78250				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T.				
		Expense Check if Austin, TX, officeholder living expense				
9000		Travel in District				
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
	Date	Payee name				
	08/18/2015	Tezel Market				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$54.00	7126 Tezel Rd.				
		San Antonio, TX 78250				
_		The state of the s				
A COMPANY OF THE PARK OF THE P	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Transportation Equipment & Related Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Travel in District				
<u> </u>	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					
-	Date					
	08/21/2015	Payee name Tezel Market				
<u> </u>						
	Amount (\$)	Payee address; City; State; Zip Code				
	\$47.00	7126 Tezel Rd.				
		San Antonio, TX 78250				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITORE	Expense Check if Austin, TX, officeholder living expense				
		Travel in District				
<u></u>						
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held				
	experience to beliefit C/Of					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	
1 Total pages Schedule F1: Sch: 20/21 Rpt: 30/31	2 FILER NAME 3 Filer ID Lopez, Raynaldo
4 Date 09/20/2015	5 Payee name Tezel Market
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 7126 Tezel Rd. San Antonio, TX 78250
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel in District
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 10/01/2015	Payee name Tezel Market
Amount (\$) \$28.20	Payee address; City; State; Zip Code 7126 Tezel Rd.
PURPOSE OF EXPENDITURE	San Antonio, TX 78250 (a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel in District
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 10/06/2015	Payee name Tezel Market
Amount (\$) \$25.00	Payee address; City; State; Zip Code 7126 Tezel Rd.
	San Antonio, TX 78250
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Travel in District
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
dvertising Expense Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made B Candidate/Officeholder/Politic	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 21/21 Rpt: 31/31	Lopez, Raynaldo
4 Date	5 Payee name
11/02/2015	Tezel Market
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$20.01	7126 Tezel Rd. 57 52
	San Antonio, TX 78250
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Polated (b) Description Check if travel outside of Texas, Complete Schedule T.
OF EXPENDITURE	Transportation Equipment & Related
	Expense Check if Austin, TX, officeholder living expense Travel in District
	Traver in District
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
08/10/2015	Val Verde Winery
Amount (\$)	Payee address; City; State; Zip Code
\$191.71	100
4101.11	Qualia Dr.
	Del Rio, TX 78840
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Event Donation
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
expenditure to benefit eye	
Date	Payee name
12/15/2015	Val Verde Winery
Amount (\$)	Payee address; City; State; Zip Code
\$62.23	100
	Qualia Dr.
	Del Rio, TX 78840
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Holiday Event in District
	,
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	